

CLAIMS ONLY						Application Number	Filing Date	
						10-621141		
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend		
1								
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Total Indep			3					
Total Depend			27					
Total Claims			30					